

GREENFIELD HEALTH DEPARTMENT

14 Court Square Greenfield, MA 01301

Phone: 1-413-772-1404 Fax: 1-413-772-2238



REQUEST FOR PERMISSION TO VIEW RECORDS

OR HAVE COPIES OF DOCUMENTS MADE
PLEASE KEEP THESE DOCUMENTS IN CHRONOLOGICAL ORDER

DATE:	
FILE ADDRESS/ BUSINESS NAME:	
Type of information requested	
NAME:	
ADDRESS:	
PHONE #:	

UNDER MASS GENERAL LAWS WE HAVE THE RIGHT TO MEET THE ABOVE REQUEST WITHIN TEN (10) DAYS OF THE ABOVE LISTED DATE.

For your convenience you may fax this form to: 413-772-2238

You may also mail it to: Greenfield Health Department

14 Court Square

Greenfield, MA 01301

Please be advised there is a .20 cent fee for each page.